PTO/SB/17 (07-06)

Approved for use through 01/31/2007. OMB 0551-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

To a collection of information unless it disclaves a valid OMB control number.

Under the Paperwork Reduction Act of	espond to a collection of information unless it displays a valid UMB control number.						
Effective on 12/08 Fees pursuant to the Consolidated Approp	Complete if Known Application Number 10/516,590-Conf. #8556						
			December 3, 2004				
FEE TRANS			Mattias BRYBORN				
For FY 2006					S. H. Lee		
Applicant claims small entity sta	Art Unit 2876						
TOTAL AMOUNT OF PAYMENT (\$) 180,00					782-0239PUS2		
METHOD OF DAVANCHE (-L)							
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
F	ILING FEES	SE	ARCH FEES	EXAMINA	ATION FEES		
Application Type Fee (Small Entity S) Fee (\$)	Fee (\$	Small Entity) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees F	Paid (\$)
Utility 300		500	250	200	100	-	
Design 200		100	50	130	65		
Plant 200		300	150	160	80		
Reissue 300		500	250	600	300		
Provisional 200		0	0	0	0		<u></u>
	100	v	U	U	Ü		Small Entity
2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$)							
Each claim over 20 (including Reissues) 50 25							
							100
Multiple dependent claims 360 180							
Total Claims Extra Claims	Paid (\$)	Mul	tiple Depende	nt Claims			
Total Claims Extra Claims Fee (\$) Fee Paid (\$) 28 -28 = x =				Fee	(\$) F	ee Paid (\$	<u>i)</u>
HP = highest number of total claims paid for. if greater than 20							
Indep. Claims			Pald (\$)				
5 -5= × =							
HP = highest number of Independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1 52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50							
sheets or fraction thereof See 35 U S C 41(a)(1)(G) and 37 CFR 1 16(s)							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							raiu (ə)
100 = /50 (round up to a whole number) x =							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00							
SUBMITTED BY Registration No.							
Signature Renny Caudle 46, 607 Registration No (Altomot/Agont) 29,680					Telephone (703) 205-8000		
Name (Print/Type) Michael K Mutter Date						January 23, 2007	